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- (v) Other State license number(s) and the name(s) of the State or Territory in which the license is held;
- (vi) Other numbers assigned by Federal or State agencies, including, but not limited to Drug Enforcement Administration (DEA) registration number(s), Clinical Laboratory Improvement Act (CLIA) number(s), Food and Drug Administration (FDA) number(s), and Medicaid and Medicare provider number(s);
- (vii) Names and titles of principal officers and owners;
- (viii) Name(s) and address(es) of any health care entity with which the subject is affiliated or associated; and
- (ix) Nature of the subject's relationship to each associated or affiliated health care entity.
 - (4) For all subjects:
- (i) Whether the subject will be automatically reinstated.
 - (ii) [Reserved]
- (d) Access to documents. Each State must provide the Secretary (or an entity designated by the Secretary) with access to the documents underlying the actions described in paragraphs (a)(1) through (4) of this section, as may be necessary for the Secretary to determine the facts and circumstances concerning the actions and determinations for the purpose of carrying out section 1921 of the Social Security Act.

§ 60.10 Reporting negative actions or findings taken by peer review organizations or private accreditation entities.

- (a) What actions must be reported. Each State is required to adopt a system of reporting to the NPDB any negative actions or findings (as defined in §60.3) which are taken against a health care practitioner, physician, dentist, or entity by a peer review organization or private accreditation entity. The health care practitioner, physician, dentist, or entity must be licensed or otherwise authorized by the State to provide health care services. The actions taken must be as a result of formal proceedings (as defined in §60.3).
- (b) What information must be reported. Each State must report the information as required in §60.9(b).
- (c) What information should be reported, if known: Each State should re-

- port, if known, the information as described in §60.9(c).
- (d) Access to documents. Each State must provide the Secretary (or an entity designated by the Secretary) with access to the documents underlying the actions described in this section as may be necessary for the Secretary to determine the facts and circumstances concerning the actions and determinations for the purpose of carrying out section 1921 of the Social Security Act.

§60.11 Reporting adverse actions on clinical privileges.

- (a) Reporting to the Board of Medical Examiners—(1) Actions that must be reported and to whom the report must be made. Each health care entity must report to the Board of Medical Examiners in the State in which the health care entity is located the following actions:
- (i) Any professional review action that adversely affects the clinical privileges of a physician or dentist for a period longer than 30 days;
- (ii) Acceptance of the surrender of clinical privileges or any restriction of such privileges by a physician or dentist—
- (A) While the physician or dentist is under investigation by the health care entity relating to possible incompetence or improper professional conduct, or
- (B) In return for not conducting such an investigation or proceeding; or
- (iii) In the case of a health care entity which is a professional society, when it takes a professional review action concerning a physician or dentist.
- (2) Voluntary reporting on other health care practitioners. A health care entity may report to the Board of Medical Examiners information as described in paragraph (a)(3) of this section concerning actions described in paragraph (a)(1) in this section with respect to other health care practitioners.
- (3) What information must be reported. The health care entity must report the following information concerning actions described in paragraph (a)(1) of this section with respect to a physician or dentist:
 - (i) Name,
 - (ii) Work address,
 - (iii) Home address, if known,